



05100

PATENT TRADEMARK OFFICE

DECLARATION  
AND POWER OF ATTORNEY

ORIGINAL APPLICATION

DOCKET No. GC723

AS A BELOW NAMED INVENTOR, I HEREBY DECLARE THAT:

MY RESIDENCE, POST OFFICE ADDRESS AND CITIZENSHIP ARE AS STATED BELOW NEXT TO MY NAME. I BELIEVE I AM THE ORIGINAL, FIRST AND SOLE INVENTOR (IF ONLY ONE NAME IS LISTED BELOW) OR AN ORIGINAL, FIRST AND JOINT INVENTOR (IF PLURAL NAMES ARE LISTED BELOW) OF THE SUBJECT MATTER WHICH IS CLAIMED AND FOR WHICH A PATENT IS SOUGHT ON THE INVENTION ENTITLED **HIGH THROUGHPUT MUTAGENESIS SCREENING METHOD**, THE SPECIFICATION OF WHICH

CHECK ONE:

☒ IS ATTACHED HERETO☐ WAS FILED ON \_\_\_\_\_ AS APPLICATION SERIAL NO. \_\_\_\_\_.

I HEREBY STATE THAT I HAVE REVIEWED AND UNDERSTAND THE CONTENTS OF THE ABOVE IDENTIFIED SPECIFICATION, INCLUDING THE CLAIMS, AS AMENDED BY ANY AMENDMENT REFERRED TO ABOVE. I ACKNOWLEDGE THE DUTY TO DISCLOSE INFORMATION WHICH IS MATERIAL TO PATENTABILITY AS DEFINED IN TITLE 37, CODE OF FEDERAL REGULATIONS §1.56.

I HEREBY CLAIM FOREIGN PRIORITY BENEFITS UNDER TITLE 35, UNITED STATES CODE §119, OF ANY FOREIGN APPLICATION(S) FOR PATENT OR INVENTOR'S CERTIFICATE LISTED BELOW AND HAVE ALSO IDENTIFIED BELOW ANY FOREIGN APPLICATION FOR PATENT OR INVENTOR'S CERTIFICATE HAVING A FILING DATE BEFORE THAT OF THE APPLICATION ON WHICH PRIORITY IS CLAIMED.

APPLICATION NUMBER	COUNTRY	DATE OF FILING	PRIORITY CLAIMED	
			YES	NO

I HEREBY CLAIM THE BENEFIT UNDER TITLE 35, UNITED STATES CODE §120, OF ANY UNITED STATES APPLICATION(S) LISTED BELOW AND, INsofar AS THE SUBJECT MATTER OF EACH OF THE CLAIMS OF THIS APPLICATION IS NOT DISCLOSED IN THE PRIOR UNITED STATES APPLICATION IN THE MANNER PROVIDED BY THE FIRST PARAGRAPH OF TITLE 35, UNITED STATES CODE §112, I ACKNOWLEDGE THE DUTY TO DISCLOSE MATERIAL INFORMATION AS DEFINED IN TITLE 37, CODE OF FEDERAL REGULATIONS §1.56(A) WHICH OCCURRED BETWEEN THE FILING DATE OF THE PRIOR APPLICATION AND THE NATIONAL OR PCT INTERNATIONAL FILING DATE OF THIS APPLICATION.

APPLICATION NUMBER	DATE OF FILING	STATUS - PATENTED, PENDING OR ABANDONED

**POWER OF ATTORNEY:** AS A NAMED INVENTOR I HEREBY APPOINT AS MY ATTORNEY(S) WITH FULL POWER OF SUBSTITUTION AND REVOCATION, TO PROSECUTE THIS APPLICATION AND TRANSACT ALL BUSINESS IN THE PATENT AND TRADEMARK OFFICE CONNECTED THEREWITH:

MARGARET A. HORN, REG. No. 33,401  
CHRISTOPHER L. STONE, REG. No. 35,696  
RICHARD T. ITO, REG. NO. 32,242

VICTORIA L. BOYD, REG. NO. 43,510  
 JANET KAISER CASTANEDA, REG. NO. 33,228  
 H. THOMAS ANDERTON, REG. NO. 40,895  
 KAMRIN MACKNIGHT, REG. NO. 38,230

SEND CORRESPONDENCE TO: <b>JANET KAISER CASTANEDA</b> <b>GENENCOR INTERNATIONAL, INC.</b> <b>925 PAGE MILL ROAD</b> <b>PALO ALTO, CA 94304-1013</b>	DIRECT TELEPHONE CALLS TO:  <b>(650) 846-4072</b>
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**201**

FULL NAME OF INVENTOR	FULL FIRST NAME <b>RICHARD</b>	INITIAL <b>R.</b>	LAST NAME <b>BOTT</b>	
RESIDENCE & CITIZENSHIP	CITY <b>BURLINGAME</b>	STATE OR FOREIGN COUNTRY <b>CALIFORNIA</b>		COUNTRY OF CITIZENSHIP <b>U.S.A.</b>
POST OFFICE ADDRESS	POST OFFICE ADDRESS <b>3032 HILLSIDE DRIVE</b>	CITY <b>BURLINGAME</b>	STATE OR COUNTRY <b>CALIFORNIA</b>	ZIP CODE <b>94010</b>

**202**

FULL NAME OF INVENTOR	FULL FIRST NAME <b>JAMES</b>	INITIAL <b>T.</b>	LAST NAME <b>KELLIS</b>	
RESIDENCE & CITIZENSHIP	CITY <b>PORTOLA VALLEY</b>	STATE OR FOREIGN COUNTRY <b>CALIFORNIA</b>		COUNTRY OF CITIZENSHIP <b>U.S.A.</b>
POST OFFICE ADDRESS	POST OFFICE ADDRESS <b>111 TAN OAK DRIVE</b>	CITY <b>PORTOLA VALLEY</b>	STATE OR COUNTRY <b>CALIFORNIA</b>	ZIP CODE <b>94028</b>

**203**

FULL NAME OF INVENTOR	FULL FIRST NAME <b>THOMAS</b>	INITIAL <b>B.</b>	LAST NAME <b>MORRISON</b>	
RESIDENCE & CITIZENSHIP	CITY <b>WINCHESTER</b>	STATE OR FOREIGN COUNTRY <b>MASSACHUSETTS</b>		COUNTRY OF CITIZENSHIP <b>U.S.A.</b>
POST OFFICE ADDRESS	POST OFFICE ADDRESS <b>25 MYSTIC AVENUE</b>	CITY <b>WINCHESTER</b>	STATE OR COUNTRY <b>MASSACHUSETTS</b>	ZIP CODE <b>01890</b>

**204**

FULL NAME OF INVENTOR	FULL FIRST NAME	INITIAL	LAST NAME	
RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY		COUNTRY OF CITIZENSHIP
POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY	ZIP CODE

**205**

FULL NAME OF INVENTOR	FULL FIRST NAME	INITIAL	LAST NAME	
RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY		COUNTRY OF CITIZENSHIP
POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY	ZIP CODE

I FURTHER DECLARE THAT ALL STATEMENTS MADE HEREIN OF MY OWN KNOWLEDGE ARE TRUE AND THAT ALL STATEMENTS MADE ON INFORMATION AND BELIEF ARE BELIEVED TO BE TRUE; AND FURTHER THAT THESE STATEMENTS WERE MADE WITH THE KNOWLEDGE THAT WILLFUL FALSE STATEMENTS AND THE LIKE SO MADE ARE PUNISHABLE BY FINE OR IMPRISONMENT, OR BOTH, UNDER SECTION 1001 OF TITLE 18 OF THE UNITED STATES CODE , AND THAT SUCH WILLFUL FALSE STATEMENTS MAY JEOPARDIZE THE VALIDITY OF THE APPLICATION OR ANY PATENT ISSUING THEREON.

SIGNATURE OF INVENTOR <b>201</b>	SIGNATURE OF INVENTOR <b>202</b>
DATE	DATE
SIGNATURE OF INVENTOR <b>203</b>	SIGNATURE OF INVENTOR <b>204</b>
DATE	
SIGNATURE OF INVENTOR <b>205</b>	SIGNATURE OF INVENTOR <b>206</b>
DATE	DATE